

Please Direct All Correspondence to Customer Number **20995****REQUEST FOR CONTINUED EXAMINATION**

Applicant : Isaac Mayzlin
 App. No : 09/938,804
 Filed : August 24, 2001
 For : ENHANCED OPTICAL RECOGNITION
 OF DIGITIZED IMAGES THROUGH
 SELECTIVE BIT INSERTION
 Examiner : B. Q. Le
 Art Unit : 2623

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

April 17, 2006

(Date)

John M. Carson, Reg. No. 34,303

Mail Stop RCE

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

- (X) Enclosed:
 (X) Amendment/Reply in 12 pages.
 (X) Return Postcard.

2. Fees:

| FEE CALCULATION | | | | |
|--------------------|-------------|--------------|----------------------|--------------|
| FEE TYPE | | FEE CODE | CALCULATION | TOTAL |
| RCE Fee | | 2801 (\$395) | | \$395 |
| Total Claims | 36 - 36 = 0 | 2202 (\$25) | 0 x 25 = | \$0 |
| Independent Claims | 11 - 11 = 0 | 2201 (\$100) | 0 x 100 = | \$0 |
| Multiple Claim | | 2203 (\$180) | | \$0 |
| 2 Month Extension | | 2252 (\$225) | | \$225 |
| | | | TOTAL FEE DUE | \$620 |

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(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

3. Payment:

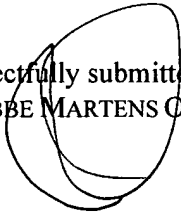
(X) Check in the amount of \$620 to cover the above fees.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

4. Other Enclosures:

(X) Return Postcard.

Respectfully submitted,
KNOBBE MARTENS OLSON & BEAR LLP



Dated: April 17, 2006

John M. Carson
Registration No. 34,303
Attorney of Record
Customer No. 20,995
(619) 235-8550